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CONFIRMATION NO. 6988

<b>SERIAL NUMBER</b> 09/315,822	<b>FILING OR 371(c) DATE</b> 05/21/1999 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3688	<b>ATTORNEY DOCKET NO.</b> INVE0013-1
<b>APPLICANTS</b> SCOTT N. CHRISTENSEN, OMAHA, NE;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 08/630,330 04/10/1996 PAT 6,035,280 which is a CIP of 08/491,367 06/16/1995 PAT 5,710,886				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/11/1999</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NE	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 8
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 31518				
<b>TITLE</b> VIRTUAL COUPONING METHOD AND APPARATUS FOR USE WITH CONSUMER KIOSK				
<b>FILING FEE RECEIVED</b> 1540	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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